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CONFIRMATION NO. 43

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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

This appn claims benefit of 60/401,267 08/04/2002

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/30/2003

\*\* SMALL ENTITY \*\*

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	MN	DRAWING 11	21	3
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

27727  
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TITLE

Method and apparatus for enhancing filter bed performance

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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